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CONFIRMATION NO. 6445

<b>SERIAL NUMBER</b> 10/665,578	<b>FILING OR 371(c) DATE</b> 09/19/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> 31132.159	
<b>APPLICANTS</b> Jeffrey Zhang, Collierville, TN; <i>OK new</i> Lukas Eisermann, Memphis, TN; <i>OK new</i>					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/412,183 09/20/2002 <i>OK new</i>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/09/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Nicholas Woodell</i> <i>new</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> TN	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 46333					
<b>TITLE</b> Instrument and method for surgical extraction					
<b>FILING FEE RECEIVED</b> 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		